For Office Use Only **U. S. COAST GUARD** Date Application ALASKA UNINSPECTED PASSENGER VESSEL Received: **VOLUNTARY 5 STAR SAFETY PROGRAM Date Owner Contacted:** Use this form to apply for vessel examination and award of one to five stars depending on amount and type of safety equipment carried. Upon successful **Date Decal Awarded:** examination of your vessel, a decal will be awarded depicting the star level awarded. This decal is valid through December 31 of the year of issue. Name of Examiner: CCGD17 FORM 17-16710 (5/03) Location of exam: 1. AK # or CG Document #: 2. Coast Guard Issued OUPV License Number: 3. Vessel length: 4. Year Built: 9. Trim Color: **Decal Number:** 5. Manufacturer: 6. Hull Material: 7. Vessel Name: 8. Hull Color: [] Aluminum/Metal [] Fiberglass/Plastic **Star Rating Awarded:** [] Wood 10. Primary Area of Operation: 11. Harbor and Slip Number: 12. Start and End Dates of Operation: 13. Last Name: 14. First Name: 15. Business Phone: OWNER OR **OPERATOR** 16. Business Mailing Address: 17. Additional Owners: **INFORMATION** 18. City: 19. State: 20. Zip: [] **ONE STAR:** Vessel meets all existing requirements for a Vessel Safety Check (VSC) decal (46CFR Subch. C) issued by the CG Auxiliary and has a safety training program on OWNER OR emergency procedures and safety equipment use. **OPERATOR** [] **TWO STAR:** In addition to the requirements for one star, vessel has a properly installed high capacity bilge pump and bilge alarm (or equivalent). CERTIFICATION [] THREE STAR: In addition to the requirements for two stars, vessel has on board an OF STAR emergency means of communication (5 watt hand held VHF FM radio or equivalent). FOUR STAR: In addition to the requirements for three stars, vessel has on board, a [] **RATING** properly installed and registered Category 1 or 2, 406 MHz Emergency Position Indicating Radio Beacon (EPIRB). FIVE STAR: In addition to the requirements for four stars, vessel has a properly [] installed and serviced Coast Guard approved liferaft or Inflatable Buoyant Apparatus (IBA) for 100% of the passengers carried (or equivalent).

PRIVACY ACT STATEMENT REGARDING APPLICATION TO THE 5 STAR SAFETY PROGRAM

23. Type of Emergency Comms:

24. Bilge Pump Capacity

(GPM):

In accordance with 5 USC 552a(e), the following information is provided in connection with this request to supply personal information to the United States Coast Guard.

(1) AUTHORITY to solicit information: 46USC 4101-4106 and 46USC 4301-4311

22. EPIRB Registration No.:

21. Liferaft/IBA Serial No.:

- (2) PRINCIPAL purpose for information: Identification of uninspected passenger vessels for participation in the 5 Star Safety Program.
- (3) **ROUTINE USES,** which may be made of this information: Use by authorized Coast Guard personnel involved in administration of the 5 Star Safety Program.
- (4) **DISCLOSURE** of this information is voluntary. Failure to furnish requested information may result in non-issuance of a Star Rating decal.

I declare under penalties prescribed under 46 USC 7703 that I am the legal owner or operator of the vessel herein described and the description and all matters stated herein are true. I also acknowledge that transfer of ownership or failure to maintain my vessel in compliance with the voluntary Star Rating awarded requires immediate removal of the decal from my vessel and return to the nearest U.S. Coast Guard Office.

(907) 463-2820 PO Box 25517 Email: Juneau, AK 99802 dlaisure@cgalaska.uscg.mil	Phone: (907) 463-2819 Fax:	Attn: MST1 Don Laisure 17 th USCG District (moc)	25. Signature:	26. Date:
	(907) 463-2820 Email:	PO Box 25517 Juneau, AK 99802		

Participant Survey

The 5 Star Safety program is a voluntary program to enhance the safety of the uninspected passenger vessel fleet operating in Alaska. The Coast Guard will use information collected by this survey to assess the impact and effectiveness of the 5 Star Safety program. This survey should be completed during your vessel safety check exam.

Maximum Passengers Carried Per Trip:					Estimated Annual Number of Passengers:			
0 0 0	One Two Three	0 0 0	Four Five Six					
Equipment Exemptions Granted and Equivalent Level of Safety Provided: Equivalency Other exemptions requested: O Bilge Pump/Alarm O Liferaft/IBA								
What Additional Equipment Was Acquired to Achieve the Awarded Safety Star Rating?								
De 0 0	watering Equipme Bilge Pump Bilge Alarm	nt	EPIRB O Class O Class					
Communications O Hand-Held Radio O Satellite Phone		O Inflata			tus			
Estimated Cost of Additional Equipment Acquired: (in dollars)								
0 0 0 0	0-100 100-500 500-1000 1000-2000		O 2000- O 3000- O >400	-4000				

Why you participated in the 5 Star Safety Program? (Mark all that apply)

- O Personal safety awareness/ it was the "right thing to do".
- O To be competitive with other 6 pack operators.
- O Demand from customers for higher safety standards.
- O Need for increased safety standards in Alaska waters.